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CONFIRMATION NO. 4570

<b>SERIAL NUMBER</b> 09/542,520	<b>FILING OR 371(c) DATE</b> 04/03/2000 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1647	<b>ATTORNEY DOCKET NO.</b> 7969-076-999	
<b>APPLICANTS</b> W. James Jackson, Marriottsville, MD; John L. Pace, Germantown, MD;					
<b>** CONTINUING DATA *****</b> This application is a CON of PCT/US98/20737 10/01/1998 which is a CIP of 08/942,596 10/02/1997					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/16/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 61	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 27144					
<b>TITLE</b> CHLAMYDIA PROTEIN, GENE SEQUENCE AND USES THEREOF					
<b>FILING FEE RECEIVED</b> 2160	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		